

City of Charleston Recreation Department Athletic Program Sponsorship Form

	Yes, I want to support youth spaces. Sorry, but I am unable to comfuture sponsorship opportunit	emit at this time.	
		Contact Person:	
Phone:	Ema	ail Address:	
□ \$40,000.0 □ \$25,000.0 □ \$18,000.0 □ \$15,000.0	0 DIAMOND (SOLD) 0 PLATINUM 0 GOLD 0 SILVER	tegory you would lik □ \$6,000.00 □ \$3,000.00 □ \$1,000.00 □ \$250.00	RED LEVEL TEAM WHITE LEVEL TEAM BLUE LEVEL TEAM
\$600.00	1 YEAR SIGN SPONSORSHIP	□ \$1,000.00 YMENT METHOD	2 YEAR SIGN SPONSORSHIP

Completed sponsorship forms and payment may be given to your team coach or Athletic Coordinator. They may also be mailed to the City of Charleston Recreation Department at the address below.

Exp. Date: _____Name as it Appears on Card

Questions: Contact Robin Cooper, Athletic Superintendent at (843)724-7327 or Bethany Doman, Marketing Coordinator at (843)724-7336 823 Meeting St. Charleston, SC 29403

 \Box Check, payable to the City of Charleston \Box Master Card

Card No.

Thank you for your support!